



COUNTY OF LOS ANGELES

# REGISTRAR-RECORDER/COUNTY CLERK

P.O. BOX 53130, LOS ANGELES, CALIFORNIA 90053-0130 / (562) 462-2081

*"Enriching Lives"*

**CONNY B. McCORMACK**  
REGISTRAR-RECORDER/COUNTY CLERK

## CERTIFICATE OF IDENTITY- MILITARY DISCHARGE

In accordance with California State Law, the following identifying information is required to obtain a certified copy of a Military Discharge (DD214).

Name on Discharge \_\_\_\_\_

Relationship to Veteran \_\_\_\_\_

Please provide a photocopy of your photo identification with this certificate.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**STATE OF CALIFORNIA**

}

**County of** \_\_\_\_\_

}

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Subscribed and sworn to (or affirmed) before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, personally know to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Seal

Signature